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PTO/SB/21 (04-07)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

33

Application Number	09/777,743
Filing Date	02/06/2001
First Named Inventor	Ervin F. Johnston
Art Unit	3691
Examiner Name	Karmis, Stefanos

Attorney Docket Number

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Check for \$455.00 Return postcard for receipt by USPTO
<input type="checkbox"/> Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name		
Signature		
Printed name	Ervin F. Johnston	
Date	Reg. No.	

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature

Typed or printed name

Ervin F. Johnston

Date

May 4, 2007

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Please type a plus (+) sign inside this box -



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FEE TRANSMITTAL

Patent fees are subject to annual revision on October 1.

These are the fees effective November 10, 1998.

Small Entity payments must be supported by a small entity statement; otherwise large entity fees must be paid. See Form PTO/SB/09-72
See 37 C.F.R. §§ 1.27 and 1.28

MAY 07 2007

TOTAL AMOUNT OF PAYMENT

(\$ 455.00)

Complete If Known

Application Number	09/777,473
Filing Date	02/06/2001
First Named Inventor	E. Johnston
Examiner Name	Karmis, Stefanos
Group / Art Unit	3691
Attorney Docket No.	

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:

Deposit Account Number _____
Deposit Account Name _____Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 _____
Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance.
37 CFR 1.311(b) _____

2. Payment Enclosed:

 Check Money Order Other**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105	130	Surcharge - late filing fee or oath	_____
127	50	Surcharge - late provisional filing or cover sheet	_____
139	130	Non-English specification	_____
147	2,520	For filing a request for reexamination	_____
112	920*	Requesting publication of SIR prior to Examiner action	_____
113	1,840*	Requesting publication of SIR after Examiner action	_____
115	110	Extension for response within first month	60.00
116	380	Extension for response within second month	_____
117	870	Extension for response within third month	_____
118	1,360	Extension for response within fourth month	_____
128	1,850	Extension for response within fifth month	_____
119	300	Notice of Appeal	_____
120	300	Filing a brief in support of an appeal	_____
121	260	Request for oral hearing	_____
138	1,510	Petition to institute a public use proceeding	_____
140	110	Petition to revive unavoidably abandoned application	_____
141	1,210	Petition to revive unintentionally abandoned application	_____
142	1,210	Utility issue fee (or reissue)	_____
143	430	Design issue fee	_____
144	580	Plant issue fee	_____
122	130	Petitions to the Commissioner	_____
123	50	Petitions related to provisional applications	_____
126	240	Submission of Information Disclosure Stmt	_____
581	40	Recording each patent assignment per property (times number of properties)	_____
146	690	Filing a submission after final rejection (37 CFR 1.129(a))	_____
149	690	For each additional invention to be examined (37 CFR 1.129(b))	_____

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101	690	Utility filing fee	_____
106	310	Design filing fee	_____
107	480	Plant filing fee	_____
108	690	Reissue filing fee	_____
114	150	Provisional filing fee	_____
SUBTOTAL (1) (\$)			

2. EXTRA CLAIM FEES

Total Claims	Independent Claims	Extra Claims	Fee from Claims below	Fee Paid
32	- 32** = 0	x _____	= _____	
Independent Claims	4 - 4** = 0	x _____	= _____	
Multiple Dependent Claims	Multiple Dependent Claims	x _____	= _____	

** or number previously paid, if greater; For Reissues, see below

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103	18	Claims in excess of 20
102	78	Independent claims in excess of 3
104	260	Multiple dependent claim
109	78	** Reissue independent claims over original patent
110	18	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$)		
100.00		

*Reduced by Basic Filing Fee Paid

SUBMITTED BY

Typed or Printed Name

Ervin F. Johnston

COMPLETE (if applicable)

Reg. Number

Signature

Ervin F. Johnston

Date

May 4, 2007